

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YH	75331	
O.I.P.E. CLASSIFIER		215	02-16-09
FORMALITY REVIEW		109914	

## INDEX OF CLAIMS

= Rejected  
 - Allowed  
 - (through numeral)... Cancelled  
 + Restricted

N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date	Final	Original
1	10/16/09	✓	✓
2	10/16/09	✓	✓
3	10/16/09	✓	✓
4	10/16/09	✓	✓
5	10/16/09	✓	✓
6	10/16/09	✓	✓
7	10/16/09	✓	✓
8	10/16/09	✓	✓
9	10/16/09	✓	✓
10	10/16/09	✓	✓
11	10/16/09	✓	✓
12	10/16/09	✓	✓
13	10/16/09	✓	✓
14	10/16/09	✓	✓
15	10/16/09	✓	✓
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19	10/16/09	✓	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy